Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF NEW YORK

Case number *(if known)* ______ Chapter **11**

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals,* is available.

1.	**Debtor's name**	**Rust Belt, LLC**	
2.	**All other names debtor used in the last 8 years** Include any assumed names, trade names and *doing business as* names		
3.	**Debtor's federal Employer Identification Number** (EIN)	**46-2368611**	
4.	**Debtor's address**	**Principal place of business** **3720 Lakeshore Rd** **Blasdell, NY 14219** Number, Street, City, State & ZIP Code **Erie** County	**Mailing address, if different from principal place of business** P.O. Box, Number, Street, City, State & ZIP Code **Location of principal assets, if different from principal place of business** **Erie County** Number, Street, City, State & ZIP Code
5.	**Debtor's website** (URL)		
6.	**Type of debtor**	■ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) ☐ Partnership (excluding LLP) ☐ Other. Specify:	

7. Describe debtor's business

A. *Check one:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ■ None of the above

B. *Check all that apply*

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.uscourts.gov/four-digit-national-association-naics-codes.

____

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
- ☐ Chapter 9
- ■ Chapter 11. *Check all that apply*:
  - ■ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than $2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
  - ■ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
  - ☐ A plan is being filed with this petition.
  - ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
  - ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
  - ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

If more than 2 cases, attach a separate list.

- ☐ No.
- ■ Yes.

District	**WDNY; Ch 11, dismissed**	When	**11/30/15**	Case number	**15-bk-12573**
District		When		Case number	

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

List all cases. If more than 1, attach a separate list

- ■ No
- ☐ Yes.

Debtor				Relationship	
District		When		Case number, if known	

11. Why is the case filed in *this district?*

Check all that apply:

■ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.

☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

■ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (*Check all that apply.*)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other

Where is the property?

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency

Contact name

Phone

Statistical and administrative information

13. Debtor's estimation of available funds

. *Check one:*

■ Funds will be available for distribution to unsecured creditors.

☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

■ 1-49	☐ 1,000-5,000	☐ 25,001-50,000
☐ 50-99	☐ 5001-10,000	☐ 50,001-100,000
☐ 100-199	☐ 10,001-25,000	☐ More than100,000
☐ 200-999		

15. Estimated Assets

■ $0 - $50,000	☐ $1,000,001 - $10 million	☐ $500,000,001 - $1 billion
☐ $50,001 - $100,000	☐ $10,000,001 - $50 million	☐ $1,000,000,001 - $10 billion
☐ $100,001 - $500,000	☐ $50,000,001 - $100 million	☐ $10,000,000,001 - $50 billion
☐ $500,001 - $1 million	☐ $100,000,001 - $500 million	☐ More than $50 billion

16. Estimated liabilities

☐ $0 - $50,000	☐ $1,000,001 - $10 million	☐ $500,000,001 - $1 billion
☐ $50,001 - $100,000	☐ $10,000,001 - $50 million	☐ $1,000,000,001 - $10 billion
■ $100,001 - $500,000	☐ $50,000,001 - $100 million	☐ $10,000,000,001 - $50 billion
☐ $500,001 - $1 million	☐ $100,000,001 - $500 million	☐ More than $50 billion

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to $500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is trued and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 8, 2017**
MM / DD / YYYY

X **/s/ Anthony Moutsatsos**
Signature of authorized representative of debtor

Anthony Moutsatsos
Printed name

Title **Sole Shareholder**

18. Signature of attorney

X **/s/ Robert B. Gleichenhaus, Esq.**
Signature of attorney for debtor

Date **May 8, 2017**
MM / DD / YYYY

Robert B. Gleichenhaus, Esq.
Printed name

Gleichenhaus, Marchese & Weishaar, P.C.
Firm name

930 Convention Tower
43 Court Street
Buffalo, NY 14202
Number, Street, City, State & ZIP Code

Contact phone **(716) 845-6446** Email address

Bar number and State

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known) ______________

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ■ *Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- ■ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ■ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ■ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ■ *Schedule H: Codebtors* (Official Form 206H)
- ■ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended *Schedule* ______________
- ■ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration ______________

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 8, 2017**

X **/s/ Anthony Moutsatsos**
Signature of individual signing on behalf of debtor

Anthony Moutsatsos
Printed name

Sole Shareholder
Position or relationship to debtor

Fill in this information to identify the case:	
Debtor name	**Rust Belt, LLC**
United States Bankruptcy Court for the:	**WESTERN DISTRICT OF NEW YORK**
Case number (if known):	

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Buffalo News PO Box 650 Buffalo, NY 14240-0650		**Services**				**$1,235.00**
C.A. Curtze Co./Specialty Steak Service 1717 East 12th Street, Box797 Erie, PA 16503		**Trade debt**				**$4,101.00**
General Security 5813 Transit Road Depew, NY 14043-2819		**Servcices**				**$2,700.00**
Guercio & Sons 250 Grant St. Buffalo, NY 14213-1487		**Services**				**$1,283.00**
Internal Revenue Service Insolvency Group 1 Niagara Center, 2nd Floor 130 South Elmwood Buffalo, NY 14202		**Witholding tax arrears**				**$68,600.00**
JM Enterprises 13444 Ward Road Holland, NY 14080-9762		**Services**	**Disputed**			**$2,150.00**
KeyNiagara Bank 6950 S. Transit Road Lockport, NY 14094		**NSF fees**				**$2,300.00**
LoVullo Associates Inc 6450 Transit road Depew, NY 14043-1033		**Services**				**$1,332.00**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Montondos Seafood PO Box 466 Lockport, NY 14095-0466		**Trade debt**				**$1,183.00**
NATIONAL FUEL GAS DISTRIBUTION CORPORATI ATTN BANKRUPTCY DEPT 6363 MAIN STREET WILLIAMSVILLE, NY 14221-5887		**Utilities**				**$1,383.00**
National Grid Bankruptcy Department 300 Erie Blvd. West Syracuse, NY 13202-4201		**Utilities**				**$2,800.00**
NYS Dept. of Labor Unemployment Ins. Div. Gov. WA Harriman St Ofc Bldg Campus Building 12, Room 256 Albany, NY 12240-0001		**Witholding tax arrears**				**$5,176.00**
NYS Dept. of Taxation & Finance Bankruptcy Unit P.O. Box 5300 Albany, NY 12205-0300		**Witholding tax arrears**				**$121,000.00**
Palmer Food Services PO Box 92365 Rochester, NY 14692-0365		**Trade deby**				**$3,248.00**
Paula Brodfuher 2954 Fitch Road Pike, NY 14130		**Loan**				**$80,000.00**
Roto Rooter 135 South Ave Buffalo, NY 14224-2010		**Services**				**$2,085.00**
Shaw & Shaw PC 4819 South Park Ave Hamburg, NY 14075-1424		**Services**				**$3,770.00**

Debtor **Rust Belt, LLC** Case number *(if known)*
Name

Name of creditor and complete mailing address, including zip code	**Name, telephone number and email address of creditor contact**	**Nature of claim** (for example, trade debts, bank loans, professional services,	**Indicate if claim is contingent, unliquidated, or disputed**	**Amount of claim** If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	**Deduction for value of collateral or setoff**	**Unsecured claim**
Sysco Syracuse LLC POB 80 Warners, NY 13164-0080		**Trade debt**				**$5,035.00**
Unifirst Corp 3999 Jeffrey Blvd Buffalo, NY 14219-2334		**Services**				**$2,968.00**
Willowbrook Foods JH Wattles Inc 92 Niagara Frontier Food Terminal Buffalo, NY 14206-2945		**Trade debt**				**$2,345.00**

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known) ______

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. ***Schedule A/B: Assets-Real and Personal Property*** (Official Form 206A/B)

   1a. **Real property:**
   Copy line 88 from *Schedule A/B*.................... $ **0.00**

   1b. **Total personal property:**
   Copy line 91A from *Schedule A/B*.................... $ **20,050.00**

   1c. **Total of all property:**
   Copy line 92 from *Schedule A/B*.................... $ **20,050.00**

Part 2: Summary of Liabilities

2. ***Schedule D: Creditors Who Have Claims Secured by Property*** (Official Form 206D)
   Copy the total dollar amount listed in Column A, *Amount of claim,* from line 3 of *Schedule D*.................... $ **0.00**

3. ***Schedule E/F: Creditors Who Have Unsecured Claims*** (Official Form 206E/F)

   3a. Total claim amounts of priority unsecured claims:
   Copy the total claims from Part 1 from line 5a of *Schedule E/F*.................... $ **194,776.00**

   3b. Total amount of claims of nonpriority amount of unsecured claims:
   Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.................... +$ **132,983.00**

4. **Total liabilities** ....
   Lines 2 + 3a + 3b $ **327,759.00**

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known)

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. **Does the debtor have any cash or cash equivalents?**

☐ No. Go to Part 2.

■ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor				**Current value of debtor's interest**
2.	**Cash on hand**			**$300.00 (apx.)**

3. **Checking, savings, money market, or financial brokerage accounts** *(Identify all)*

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1.	**Citizens' Bank Operating account * setoff by NYS pre-petition**	**Checking**		**- 0 - ***
3.2.	**Citizens' Bank Payroll account * setoff by NYS pre-petition**	**Checking**		**$150.00 ***
3.3.	**Citizens' Bank Sales tax account * setoff by NYS pre-petition**	**Checking**		**- 0 - ***
3.4.	**KeyBank**	**Checking**		**$5,000.00 (apx.)**

4. **Other cash equivalents** *(Identify all)*

5. **Total of Part 1.** **$5,450.00**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

☐ No. Go to Part 3.
■ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. **Utility security deposits** **$2,500.00 (apx.)**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.** **$2,500.00**
Add lines 7 through 8. Copy the total to line 81.

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

■ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

■ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

☐ No. Go to Part 6.
■ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	**Raw materials** **Food / liquor inventory**				**$3,500.00 (apx.)**
20.	**Work in progress**				
21.	**Finished goods, including goods held for resale**				
22.	**Other inventory or supplies** **Cleaning supplies**				**$100.00 (apx.)**

23. **Total of Part 5.** **$3,600.00**
Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**
■ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

■ No
☐ Yes. Book value ______ Valuation method ______ Current Value ______

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

■ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

■ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

☐ No. Go to Part 8.
■ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	**Office furniture** **Desk & Chair**			**$100.00 (apx.)**
40.	**Office fixtures** **File / Storage Cabinets**			**$100.00 (apx.)**
41.	**Office equipment, including all computer equipment and communication systems equipment and software** **Printer, Fax, Scanner, Phone**			**$300.00 (apx.)**
42.	**Collectibles** *Examples*: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43.	**Total of Part 7.** Add lines 39 through 42. Copy the total to line 86.			**$500.00**

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

■ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

■ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
■ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**			
48. **Watercraft, trailers, motors, and related accessories** *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. **Aircraft and accessories**			
50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**			
Misceallaneous restaurant equipment, including: Bar equipment, smallware, silverware, basic kitchen utensils, etc.			**$5,000.00 (apx.)**
Miscellaneous restaurant furnishings, including: Chairs, Tables, Stools, decorations, (2) TVs, beer signage, etc.			**$3,000.00 (apx.)**

51. **Total of Part 8.**
Add lines 47 through 50. Copy the total to line 87. **$8,000.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
■ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
■ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

■ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☐ No. Go to Part 11.
■ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. **Patents, copyrights, trademarks, and trade secrets**			
61. **Internet domain names and websites**			
62. **Licenses, franchises, and royalties**			
Liquor license * expires 07/2017			**- 0 - ***

63. **Customer lists, mailing lists, or other compilations**

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.** **$0.00**
Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C.§§ 101(41A) and 107**?**
- ■ No
- ☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**
- ■ No
- ☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**
- ■ No
- ☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**
Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
- ■ Yes Fill in the information below.

	Current value of debtor's interest
71. **Notes receivable** Description (include name of obligor)	
72. **Tax refunds and unused net operating losses (NOLs)** Description (for example, federal, state, local)	
73. **Interests in insurance policies or annuities** **Standard insurance policies, including:** **Liability, Fire, Workers' Compensation , Diability, etc.**	**- 0 -**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**	
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**	
76. **Trusts, equitable or future interests in property**	
77. **Other property of any kind not already listed** *Examples:* Season tickets, country club membership	

78. **Total of Part 11.** **$0.00**
Add lines 71 through 77. Copy the total to line 90.

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
- ■ No
- ☐ Yes

Debtor **Rust Belt, LLC** Case number *(If known)*
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

	Type of property	Current value of personal property	Current value of real property
80.	**Cash, cash equivalents, and financial assets.** *Copy line 5, Part 1*	**$5,450.00**	
81.	**Deposits and prepayments.** *Copy line 9, Part 2.*	**$2,500.00**	
82.	**Accounts receivable.** *Copy line 12, Part 3.*	**$0.00**	
83.	**Investments.** *Copy line 17, Part 4.*	**$0.00**	
84.	**Inventory.** *Copy line 23, Part 5.*	**$3,600.00**	
85.	**Farming and fishing-related assets.** *Copy line 33, Part 6.*	**$0.00**	
86.	**Office furniture, fixtures, and equipment; and collectibles.** *Copy line 43, Part 7.*	**$500.00**	
87.	**Machinery, equipment, and vehicles.** *Copy line 51, Part 8.*	**$8,000.00**	
88.	**Real property.** *Copy line 56, Part 9*...>		**$0.00**
89.	**Intangibles and intellectual property.** *Copy line 66, Part 10.*	**$0.00**	
90.	**All other assets.** *Copy line 78, Part 11.*	+ **$0.00**	
91.	**Total.** Add lines 80 through 90 for each column	**$20,050.00**	**+** 91b. **$0.00**
92.	**Total of all property on Schedule A/B**. Add lines 91a+91b=92		**$20,050.00**

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known) ______

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

■ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known) ______________

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

■ Yes. Go to line 2.

2. **List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	Total claim	Priority amount
2.1	**Internal Revenue Service Insolvency Group 1 Niagara Center, 2nd Floor 130 South Elmwood Buffalo, NY 14202**	*Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed	**$68,600.00**	**$55,600.00**
	Date or dates debt was incurred **2013+**	Basis for the claim: **Witholding tax arrears**		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? ■ No ☐ Yes		
2.2	**NYS Dept. of Labor Unemployment Ins. Div. Gov. WA Harriman St Ofc Bldg Campus Building 12, Room 256 Albany, NY 12240-0001**	*Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed	**$5,176.00**	**$5,176.00**
	Date or dates debt was incurred **2013+**	Basis for the claim: **Witholding tax arrears**		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? ■ No ☐ Yes		

2.3	Priority creditor's name and mailing address	As of the petition filing date, the claim is:	$121,000.00	$105,000.00
	NYS Dept. of Taxation & Finance **Bankruptcy Unit** **P.O. Box 5300** **Albany, NY 12205-0300**	*Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed		
	Date or dates debt was incurred **2013+**	Basis for the claim: **Witholding tax arrears**		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? ■ No ☐ Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. **List in alphabetical order all of the creditors with nonpriority unsecured claims**. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1	**Nonpriority creditor's name and mailing address**	**As of the petition filing date, the claim is:** *Check all that apply.*	**$50.00**
	BHL Media and Marketing Inc **Po Box 433** **East Amherst, NY 14051-0433**	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Date(s) debt was incurred _ **Last 4 digits of account number** _	**Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	

3.2	**Nonpriority creditor's name and mailing address**	**As of the petition filing date, the claim is:** *Check all that apply.*	**$52.00**
	Buffalo Exterminating **3636 North Buffalo Road** **Orchard Park, NY 14127-1989**	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Date(s) debt was incurred _ **Last 4 digits of account number** _	**Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	

3.3	**Nonpriority creditor's name and mailing address**	**As of the petition filing date, the claim is:** *Check all that apply.*	**$1,235.00**
	Buffalo News **PO Box 650** **Buffalo, NY 14240-0650**	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Date(s) debt was incurred _ **Last 4 digits of account number** _	**Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	

3.4	**Nonpriority creditor's name and mailing address**	**As of the petition filing date, the claim is:** *Check all that apply.*	**$4,101.00**
	C.A. Curtze Co./Specialty Steak Service **1717 East 12th Street, Box797** **Erie, PA 16503**	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Date(s) debt was incurred _ **Last 4 digits of account number** _	**Basis for the claim:** Trade debt Is the claim subject to offset? ■ No ☐ Yes	

3.5	**Nonpriority creditor's name and mailing address**	**As of the petition filing date, the claim is:** *Check all that apply.*	**$114.00**
	Community Newspapers of WNY **75 Boxwood lane** **Buffalo, NY 14227-2707**	☐ Contingent ☐ Unliquidated ☐ Disputed	
	Date(s) debt was incurred _ **Last 4 digits of account number** _	**Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	

3.6 **Nonpriority creditor's name and mailing address**
General Security
5813 Transit Road
Depew, NY 14043-2819
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$2,700.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: Servcices
Is the claim subject to offset? ■ No ☐ Yes

3.7 **Nonpriority creditor's name and mailing address**
Guercio & Sons
250 Grant St.
Buffalo, NY 14213-1487
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$1,283.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: Services
Is the claim subject to offset? ■ No ☐ Yes

3.8 **Nonpriority creditor's name and mailing address**
IRS Help Inc
2952 Seneca St
Buffalo, NY 14224-1949
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$1.00**
☐ Contingent
■ Unliquidated
■ Disputed
Basis for the claim: Consulting
Is the claim subject to offset? ■ No ☐ Yes

3.9 **Nonpriority creditor's name and mailing address**
JM Enterprises
13444 Ward Road
Holland, NY 14080-9762
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$2,150.00**
☐ Contingent
☐ Unliquidated
■ Disputed
Basis for the claim: Services
Is the claim subject to offset? ■ No ☐ Yes

3.10 **Nonpriority creditor's name and mailing address**
KeyNiagara Bank
6950 S. Transit Road
Lockport, NY 14094
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$2,300.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: NSF fees
Is the claim subject to offset? ■ No ☐ Yes

3.11 **Nonpriority creditor's name and mailing address**
Leatherstocking
Po Box 630
Cooperstown, NY 13326-0630
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$473.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: Services
Is the claim subject to offset? ■ No ☐ Yes

3.12 **Nonpriority creditor's name and mailing address**
LoVullo Associates Inc
6450 Transit road
Depew, NY 14043-1033
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$1,332.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: Services
Is the claim subject to offset? ■ No ☐ Yes

	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: *Check all that apply.*	Amount
3.13	**Montondos Seafood** **PO Box 466** **Lockport, NY 14095-0466** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Trade debt Is the claim subject to offset? ■ No ☐ Yes	**$1,183.00**
3.14	**Moots, LLC** **3720 Lakeshore Rd** **Blasdell, NY 14219** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Personal loa Is the claim subject to offset? ■ No ☐ Yes	**$10,000.00**
3.15	**NATIONAL FUEL GAS DISTRIBUTION CORPORATI** **ATTN BANKRUPTCY DEPT** **6363 MAIN STREET** **WILLIAMSVILLE, NY 14221-5887** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Utilities Is the claim subject to offset? ■ No ☐ Yes	**$1,383.00**
3.16	**National Grid** **Bankruptcy Department** **300 Erie Blvd. West** **Syracuse, NY 13202-4201** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Utilities Is the claim subject to offset? ■ No ☐ Yes	**$2,800.00**
3.17	**Palmer Food Services** **PO Box 92365** **Rochester, NY 14692-0365** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Trade deby Is the claim subject to offset? ■ No ☐ Yes	**$3,248.00**
3.18	**Paula Brodfuher** **2954 Fitch Road** **Pike, NY 14130** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Loan Is the claim subject to offset? ■ No ☐ Yes	**$80,000.00**
3.19	**Pepsi Cola** **PO Box 75948** **Chicago, IL 60675-5948** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Trade debt Is the claim subject to offset? ■ No ☐ Yes	**$615.00**

3.20	**Nonpriority creditor's name and mailing address** **Pure Force** **P.O. box 32027** **New York, NY 10087** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Equipment lease arrears Is the claim subject to offset? ■ No ☐ Yes	**$964.00**
3.21	**Nonpriority creditor's name and mailing address** **Roto Rooter** **135 South Ave** **Buffalo, NY 14224-2010** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	**$2,085.00**
3.22	**Nonpriority creditor's name and mailing address** **Sentry South Applicance Service** **174 Orchard Park Road** **Buffalo, NY 14224-2627** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	**$289.00**
3.23	**Nonpriority creditor's name and mailing address** **Shaw & Shaw PC** **4819 South Park Ave** **Hamburg, NY 14075-1424** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	**$3,770.00**
3.24	**Nonpriority creditor's name and mailing address** **Sysco Syracuse LLC** **POB 80** **Warners, NY 13164-0080** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Trade debt Is the claim subject to offset? ■ No ☐ Yes	**$5,035.00**
3.25	**Nonpriority creditor's name and mailing address** **The Hartford** **1 hartford Plaza** **Hartford, CT 06155-0001** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	**$507.00**
3.26	**Nonpriority creditor's name and mailing address** **Unifirst Corp** **3999 Jeffrey Blvd** **Buffalo, NY 14219-2334** **Date(s) debt was incurred** _ **Last 4 digits of account number** _	**As of the petition filing date, the claim is:** *Check all that apply.* ☐ Contingent ☐ Unliquidated ☐ Disputed **Basis for the claim:** Services Is the claim subject to offset? ■ No ☐ Yes	**$2,968.00**

3.27 **Nonpriority creditor's name and mailing address**
Willowbrook Foods
JH Wattles Inc
92 Niagara Frontier Food Terminal
Buffalo, NY 14206-2945
Date(s) debt was incurred _
Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.* **$2,345.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: Trade debt
Is the claim subject to offset? ■ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	**Anthony Moutsatsos** **350 East North Street** **Buffalo, NY 14204**	Line 2.1 ☐ Not listed. Explain ____	_
4.2	**Relin, Goldstein, and Crane LLP** **28 E. Main St - Suite 1800** **Rochester, NY 14614-1989**	Line 3.4 ☐ Not listed. Explain ____	_
4.3	**Relin, Goldstein, and Crane LLP** **28 E. Main St - Suite 1800** **Rochester, NY 14614-1989**	Line 3.17 ☐ Not listed. Explain ____	_
4.4	**Relin, Goldstein, and Crane LLP** **28 E. Main St - Suite 1800** **Rochester, NY 14614-1989**	Line 3.24 ☐ Not listed. Explain ____	_

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	$ 194,776.00
5b. Total claims from Part 2	5b. +	$ 132,983.00
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	$ 327,759.00

Fill in this information to identify the case:

Debtor name **Rust Belt, LLC**

United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK

Case number (if known) ____________

☐ Check if this is an amended filing

Official Form 206G
Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. **Does the debtor have any executory contracts or unexpired leases?**
   ☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.
   ■ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.1.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	**Debtor leases POS machinery from First Data**	**First Data** **5565 Glenridge Cnnector NE** **Atlanta, GA 30342-4756**
2.2.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	**Debtor leases a commercial dishwasher from Magic White, Inc.**	**Magic White, Inc.** **402 Vulcan Street** **Buffalo, NY 14207**
2.3.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	**Debtor leases 3720 Lakeshore Rd from Moots, LLC**	**Moots, LLC** **3720 Lakeshore Rd** **Blasdell, NY 14219**

Fill in this information to identify the case:
Debtor name **Rust Belt, LLC**
United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK
Case number (if known)

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
■ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: **Codebtor**		*Column 2:* **Creditor**	
	Name	**Mailing Address**	**Name**	*Check all schedules that apply:*
2.1	**Anthony Moutsatsos**	**350 East North Street** **Buffalo, NY 14204**	**NYS Dept. of Taxation & Finance**	☐ D ■ E/F **2.3** ☐ G
2.2	**Anthony Moutsatsos**	**350 East North St** **Buffalo, NY 14204**	**C.A. Curtze Co./Specialty Steak Service**	☐ D ■ E/F **3.4** ☐ G
2.3	**Anthony Moutsatsos**	**350 East North St** **Buffalo, NY 14204**	**Palmer Food Services**	☐ D ■ E/F **3.17** ☐ G
2.4	**Anthony Moutsatsos**	**350 East North St** **Buffalo, NY 14204**	**Sysco Syracuse LLC**	☐ D ■ E/F **3.24** ☐ G

Fill in this information to identify the case:	
Debtor name	**Rust Belt, LLC**
United States Bankruptcy Court for the:	WESTERN DISTRICT OF NEW YORK
Case number (if known)	

☐ Check if this is an amended filing

Official Form 207
Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. **Gross revenue from business**

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year	**Sources of revenue** Check all that apply	**Gross revenue** (before deductions and exclusions)
From the beginning of the fiscal year to filing date: From **1/01/2017** to **Filing Date**	☐ Operating a business ■ Other **approx Operating a Business**	**$150,000.00**
For prior year: From **1/01/2016** to **12/31/2016**	☐ Operating a business ■ Other **approx Operating a Business**	**$315,000.00**
For year before that: From **1/01/2015** to **12/31/2015**	☐ Operating a business ■ Other **approx Operating a Business**	**$250,000.00**

2. **Non-business revenue**
Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

■ None.

Description of sources of revenue	**Gross revenue from each source** (before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. **Certain payments or transfers to creditors within 90 days before filing this case**
List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than $6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

■ None.

Creditor's Name and Address	**Dates**	**Total amount of value**	**Reasons for payment or transfer** *Check all that apply*

4. **Payments or other transfers of property made within 1 year before filing this case that benefited any insider**
List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than $6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

■ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer

5. **Repossessions, foreclosures, and returns**
List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
NYS Dept. of Taxation & Finance Bankruptcy Unit P.O. Box 5300 Albany, NY 12205-0300	**Sales tax seizure**	**04/2017**	**$3,000.00**

6. **Setoffs**
List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

■ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount

Part 3: **Legal Actions or Assignments**

7. **Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**
List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	**Only in the context of tax collection**			☐ Pending ☐ On appeal ☐ Concluded
7.2.	**In re Rust Belt, LLC 15-12573**	**Bankruptcy**	**United States Bankruptcy Court -WDNY**	☐ Pending ☐ On appeal ■ Concluded

8. **Assignments and receivership**
List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

■ None

Part 4: **Certain Gifts and Charitable Contributions**

9. **List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than $1,000**

■ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value

Part 5: Certain Losses

10. **All losses from fire, theft, or other casualty within 1 year before filing this case.**

■ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B *(Schedule A/B: Assets – Real and Personal Property)*.	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers

11. **Payments related to bankruptcy**
List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	**Gleichenhaus, Marchese & Weishaar, PC** **930 Convention Tower** **43 Court Street** **Buffalo, NY 14202**	Attorney Fees	05/2017+	$8,000.00

Email or website address

Who made the payment, if not debtor?

12. **Self-settled trusts of which the debtor is a beneficiary**
List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

■ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value

13. **Transfers not already listed on this statement**
List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

■ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value

Part 7: Previous Locations

14. **Previous addresses**
List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

■ Does not apply

Address	Dates of occupancy From-To

Part 8: Health Care Bankruptcies

15. **Health Care bankruptcies**
Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

■ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information

16. **Does the debtor collect and retain personally identifiable information of customers?**

■ No.
☐ Yes. State the nature of the information collected and retained.

17. **Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

■ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. **Closed financial accounts**
Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

■ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer

19. **Safe deposit boxes**
List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

■ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?

20. **Off-premises storage**
List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

■ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. **Property held for another**
List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Landlord	**3720 Lakeshore Rd Blasdell, NY 14219**	**Various kitchen applianes/equipment leased from landlord**	**$10,000.00**

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. **Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

■ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case

23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

■ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

24. **Has the debtor notified any governmental unit of any release of hazardous material?**

■ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

25. **Other businesses in which the debtor has or has had an interest**
List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

■ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed

26. **Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

	Name and address	Date of service From-To
26a.1.	**B&I Tax Center**	**2015+**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

■ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

■ None

Name and address	If any books of account and records are unavailable, explain why

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

■ None

Name and address

27. **Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

■ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1.	**Only general monitoring by Debtor**		

Name and address of the person who has possession of inventory records
.

28. **List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
Anthony Moutsatsos		**Sole member**	**100%**

29. **Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?**

- ■ No
- ☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**
Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ■ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1.	**Anthony Moutsatsos**	**Monthly draws, $1100**		
	Relationship to debtor **Sole shareholder**			

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ■ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation

32. **Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ■ No
- ☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to $500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **May 8, 2017**

/s/ Anthony Moutsatsos
Signature of individual signing on behalf of the debtor

Anthony Moutsatsos
Printed name

Position or relationship to debtor **Sole Shareholder**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

■ No
☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Western District of New York

In re **Rust Belt, LLC** Debtor(s)

Case No.

Chapter **11**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	$ **Usual Hourly Rates**
For the filing of this Petition I have received	$ **5,783.00**
Prior to the date of filing, the Debtor paid legal fees to Gleichenhaus, Marchese & Weishaar, P.C. in the amount of	$ **2,500.00**
Funds held for legal fees and disbursements incurred subsequent to the date of filing	$ **5,783.00**
Balance Due	$ **Usual Hourly Rates**

2. $ **1,717.00** of the filing fee has been paid direct by the Debtor in Possession.

3. The source of the compensation paid to me was:

   ☐ Debtor ☑ Other (specify):

   Moots, Inc. $5,783

4. The source of compensation to be paid to me is:

   ☑ Debtor ☑ Other (specify):

   Personally guaranteed by: Anthony Moutsatsos

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

   a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
   b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
   c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
   d. [Other provisions as needed]
      Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
   Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Robert B. Gleichenhaus, Esq.
Signature of Attorney
Gleichenhaus, Marchese & Weishaar, PC
930 Convention Tower
43 Court Street
Buffalo, NY 14202
(716) 845-6446
Name of law firm

United States Bankruptcy Court
Western District of New York

In re	**Rust Belt, LLC**	Case No.	
	Debtor(s)	Chapter	**11**

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Anthony Moutsatsos **350 East North Street** **Buffalo, NY 14204**	**100%**	**100%**	**100%**

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Sole Shareholder** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **May 8, 2017**

Signature **/s/ Anthony Moutsatsos**
Anthony Moutsatsos

Penalty for making a false statement of concealing property: Fine of up to $500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court
Western District of New York

In re	**Rust Belt, LLC**	Case No.	
	Debtor(s)	Chapter	**11**

VERIFICATION OF CREDITOR MATRIX

I, the Sole Shareholder of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **May 8, 2017**

/s/ Anthony Moutsatsos
Anthony Moutsatsos/**Sole Shareholder**
Signer/Title

Anthony Moutsatsos
350 East North Street
Buffalo, NY 14204

Anthony Moutsatsos
350 East North St
Buffalo, NY 14204

BHL Media and Marketing Inc
Po Box 433
East Amherst, NY 14051-0433

Buffalo Exterminating
3636 North Buffalo Road
Orchard Park, NY 14127-1989

Buffalo News
PO Box 650
Buffalo, NY 14240-0650

C.A. Curtze Co./Specialty Steak Service
1717 East 12th Street, Box797
Erie, PA 16503

Capital Management Services
698 1/2 South Odgen St
Buffalo, NY 14206-2317

Community Newspapers of WNY
75 Boxwood lane
Buffalo, NY 14227-2707

Complete Payment Rec Services, Inc
3500 5th St
Northport, AL 35476-4723

First Data
5565 Glenridge Cnnector NE
Atlanta, GA 30342-4756

FirstSource Advantage LLC
205 Bryant Woods South
Buffalo, NY 14228-3609

General Security
5813 Transit Road
Depew, NY 14043-2819

Guercio & Sons
250 Grant St.
Buffalo, NY 14213-1487

Internal Revenue Service
Insolvency Group 1
Niagara Center, 2nd Floor
130 South Elmwood
Buffalo, NY 14202

IRS Help Inc
2952 Seneca St
Buffalo, NY 14224-1949

JM Enterprises
13444 Ward Road
Holland, NY 14080-9762

KeyNiagara Bank
6950 S. Transit Road
Lockport, NY 14094

Leatherstocking
Po Box 630
Cooperstown, NY 13326-0630

LoVullo Associates Inc
6450 Transit road
Depew, NY 14043-1033

Magic White, Inc.
402 Vulcan Street
Buffalo, NY 14207

Mercantile Adjustment Bureau
Po Box 9055
Buffalo, NY 14231-9055

Montondos Seafood
PO Box 466
Lockport, NY 14095-0466

Moots, LLC
3720 Lakeshore Rd
Blasdell, NY 14219

NATIONAL FUEL GAS DISTRIBUTION CORPORATI
ATTN BANKRUPTCY DEPT
6363 MAIN STREET
WILLIAMSVILLE, NY 14221-5887

National Grid
Bankruptcy Department
300 Erie Blvd. West
Syracuse, NY 13202-4201

NYS Dept. of Labor
Unemployment Ins. Div.
Gov. WA Harriman St Ofc Bldg Campus
Building 12, Room 256
Albany, NY 12240-0001

NYS Dept. of Taxation & Finance
Bankruptcy Unit
P.O. Box 5300
Albany, NY 12205-0300

Palmer Food Services
PO Box 92365
Rochester, NY 14692-0365

Paula Brodfuher
2954 Fitch Road
Pike, NY 14130

Pepsi Cola
PO Box 75948
Chicago, IL 60675-5948

Pure Force
P.O. box 32027
New York, NY 10087

Relin, Goldstein, and Crane LLP
28 E. Main St - Suite 1800
Rochester, NY 14614-1989

RMS
PO Box 280431
East Hartford, CT 06128-0431

Roto Rooter
135 South Ave
Buffalo, NY 14224-2010

Sentry South Applicance Service
174 Orchard Park Road
Buffalo, NY 14224-2627

Shaw & Shaw PC
4819 South Park Ave
Hamburg, NY 14075-1424

Sysco Syracuse LLC
POB 80
Warners, NY 13164-0080

Szabo
3355 Lenox Rd Ne Ste 945
Atlanta, GA 30326-1395

The Hartford
1 hartford Plaza
Hartford, CT 06155-0001

Unifirst Corp
3999 Jeffrey Blvd
Buffalo, NY 14219-2334

Willowbrook Foods
JH Wattles Inc
92 Niagara Frontier Food Terminal
Buffalo, NY 14206-2945

United States Bankruptcy Court
Western District of New York

In re	**Rust Belt, LLC**	Case No.	
	Debtor(s)	Chapter	**11**

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Rust Belt, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

May 8, 2017
Date

/s/ Robert B. Gleichenhaus, Esq.
Robert B. Gleichenhaus, Esq.
Signature of Attorney or Litigant
Counsel for **Rust Belt, LLC**

Gleichenhaus, Marchese & Weishaar, P.C.
930 Convention Tower
43 Court Street
Buffalo, NY 14202
(716) 845-6446 Fax:(716) 845-6475

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF NEW YORK

In re	Proceedings Under Chapter 11
Rust Belt, LLC,	Tax I.D. No. 46-2368611
Debtor.	Case No.:
	Assigned Judge:

DEBTOR'S AFFIDAVIT REGARDING ITS DUTY TO PROVIDE CERTAIN FINANCIAL STATEMENTS AS REQUIRED UNDER 11 U.S.C. §1116(1)

The Debtor-In-Possession, Rust Belt, LLC (the "Debtor") hereby affirms:

1. The Debtor filed their voluntary petition for relief under Chapter 11 on May __, 2017 (the "Filing").

2. The Debtor is a privately owned New York State limited liability company with its principal place of business in Blasdell, New York and its principal assets located in Erie County. The Debtor is in the business of operating a bar / restaurant.

3. The Debtor is a small business as defined by §101(51C) of the United States Bankruptcy Code.

4. This Affidavit is submitted regarding Debtor's duty to append to its Petition copies of certain financial statements, including its most recent balance sheet, statement of operations and cash-flow statement as required under 11 U.S.C. §1116(1).

5. The Debtor hereby exclaims that, to date, the Debtor has not prepared a balance sheet, statement of operations, cash-flow statement; however, the last filed tax return is attached hereto.

DATED: May 8, 2017

Anthony Moutsatsos
Sole Member

Subscribed and sworn to
before me this 8th day of
May, 2017

Form **1040** Department of the Treasury—Internal Revenue Service (99)
U.S. Individual Income Tax Return **2015** OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2015, or other tax year beginning , 2015, ending , 20 See separate instructions.

Your first name and initial	Last name	Your social security number
ANTHONY	MOUTSATSOS	
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
MARIA	MOUTSATSOS	
Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.	▲ Make sure the SSN(s) above and on line 6c are correct.
350 E NORTH ST		
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).		**Presidential Election Campaign** Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse
BUFFALO NY 14204		
Foreign country name	Foreign province/state/county	Foreign postal code

Filing Status

Check only one box.

1 ☐ Single
2 ☒ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☒ **Spouse**

Boxes checked on 6a and 6b: 2

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if child under age 17 qualifying for child tax credit (see instructions)
			☐
			☐
			☐
			☐

If more than four dependents, see instructions and check here ▶ ☐

No. of children on 6c who:
• lived with you
• did not live with you due to divorce or separation (see instructions)
Dependents on 6c not entered above

d Total number of exemptions claimed — Add numbers on lines above ▶ 2

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see instructions.

Line	Description		Line	Amount
7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	
8a	**Taxable** interest. Attach Schedule B if required		8a	
b	**Tax-exempt** interest. **Do not** include on line 8a	8b		
9a	Ordinary dividends. Attach Schedule B if required		9a	
b	Qualified dividends	9b		
10	Taxable refunds, credits, or offsets of state and local income taxes		10	
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	-6,854.
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	
14	Other gains or (losses). Attach Form 4797		14	
15a	IRA distributions	15a	b Taxable amount 15b	
16a	Pensions and annuities	16a	b Taxable amount 16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	-1,564.
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation		19	
20a	Social security benefits	20a	b Taxable amount 20b	
21	Other income. List type and amount Net Operating Loss - SEE STMT		21	-40,674.
22	Combine the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	-49,092.

Adjusted Gross Income

Line	Description	Line	Amount	Line	Amount
23	Educator expenses	23			
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24			
25	Health savings account deduction. Attach Form 8889	25			
26	Moving expenses. Attach Form 3903	26			
27	Deductible part of self-employment tax. Attach Schedule SE	27			
28	Self-employed SEP, SIMPLE, and qualified plans	28			
29	Self-employed health insurance deduction	29			
30	Penalty on early withdrawal of savings	30			
31a	Alimony paid b Recipient's SSN ▶	31a			
32	IRA deduction	32			
33	Student loan interest deduction	33			
34	Tuition and fees. Attach Form 8917	34			
35	Domestic production activities deduction. Attach Form 8903	35			
36	Add lines 23 through 35			36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶			37	-49,092.

Tax and Credits

Line	Description	Box	Amount
38	Amount from line 37 (adjusted gross income)	38	-49,092.
39a	Check if: ☐ You were born before January 2, 1951, ☐ Blind. ☐ Spouse was born before January 2, 1951, ☐ Blind. Total boxes checked ▶ 39a		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here ▶ 39b ☐		
40	**Itemized deductions** (from Schedule A) **or** your **standard deduction** (see left margin)	40	12,600.
41	Subtract line 40 from line 38	41	-61,692.
42	**Exemptions.** If line 38 is $154,950 or less, multiply $4,000 by the number on line 6d. Otherwise, see instructions	42	8,000.
43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	0.
44	**Tax** (see instructions). Check if any from: a ☐ Form(s) 8814 b ☐ Form 4972 c ☐	44	0.
45	**Alternative minimum tax** (see instructions). Attach Form 6251	45	
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46 ▶	47	0.
48	Foreign tax credit. Attach Form 1116 if required	48	
49	Credit for child and dependent care expenses. Attach Form 2441	49	
50	Education credits from Form 8863, line 19	50	
51	Retirement savings contributions credit. Attach Form 8880	51	
52	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. Attach Form 5695	53	
54	Other credits from Form: a ☒ 3800 b ☐ 8801 c ☐	54	0.
55	Add lines 48 through 54. These are your **total credits**	55	0.
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0- ▶	56	0.

Standard Deduction for—
- People who check any box on line 39a or 39b **or** who can be claimed as a dependent, see instructions.
- All others:

Single or Married filing separately, $6,300

Married filing jointly or Qualifying widow(er), $12,600

Head of household, $9,250

Other Taxes

Line	Description	Box	Amount
57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a ☐ 4137 b ☐ 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: individual responsibility (see instructions) Full-year coverage ☐	61	
62	Taxes from: a ☐ Form 8959 b ☐ Form 8960 c ☐ Instructions; enter code(s)	62	
63	Add lines 56 through 62. This is your **total tax** ▶	63	0.

Payments

Line	Description	Box	Amount
64	Federal income tax withheld from Forms W-2 and 1099	64	
65	2015 estimated tax payments and amount applied from 2014 return	65	
66a	**Earned income credit (EIC)** No	66a	
b	Nontaxable combat pay election 66b		
67	Additional child tax credit. Attach Schedule 8812	67	
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	
71	Excess social security and tier 1 RRTA tax withheld	71	
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a ☐ 2439 b ☐ Reserved c ☐ 8885 d ☐	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your **total payments** ▶	74	

If you have a qualifying child, attach Schedule EIC.

Refund

Line	Description	Box	Amount
75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you **overpaid**	75	
76a	Amount of line 75 you want **refunded to you.** If Form 8888 is attached, check here ▶ ☐	76a	
b	Routing number X X X X X X X X X ▶ c Type: ☐ Checking ☐ Savings		
d	Account number X X X X X X X X X X X X X X X X X		
77	Amount of line 75 you want **applied to your 2016 estimated tax** ▶ 77		

Direct deposit? See instructions.

Amount You Owe

Line	Description	Box	Amount
78	**Amount you owe.** Subtract line 74 from line 63. For details on how to pay, see instructions ▶	78	0.
79	Estimated tax penalty (see instructions) 79		

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☒ **Yes.** Complete below. ☐ **No**

Designee's name ▶ ANTHONY S ILLOS RTRP Phone no. ▶ (716)688-0341 Personal identification number (PIN) ▶ 31638

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See instructions. Keep a copy for your records.

Your signature	Date	Your occupation	Daytime phone number
		RESTAURANT MGR	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		NONE	

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☒ if self-employed	PTIN
ANTHONY S ILLOS RTRP	ANTHONY S ILLOS RTRP	09/26/2016		P00031638

Firm's name ▶ B & I TAX CENTER Firm's EIN ▶

Firm's address ▶ 68 HERITAGE RD W AMHERST NY 14221 Phone no. (716)688-0341

SCHEDULE C (Form 1040)
Department of the Treasury Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

▶ Information about Schedule C and its separate instructions is at *www.irs.gov/schedulec*.
▶ Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.

OMB No. 1545-0074
2015
Attachment Sequence No. 09

Name of proprietor: ANTHONY MOUTSATSOS
Social security number (SSN):

A Principal business or profession, including product or service (see instructions): RUST BELT, LLC
B Enter code from instructions ▶ 7 2 1 1 1 0
C Business name. If no separate business name, leave blank. RUST BELT LLC
D Employer ID number (EIN), (see instr.) 8 6 1 1
E Business address (including suite or room no.) ▶ 3720 LAKESHORE RD
City, town or post office, state, and ZIP code: BUFFALO, NY 14219
F Accounting method: (1) ☒ Cash (2) ☐ Accrual (3) ☐ Other (specify) ▶
G Did you "materially participate" in the operation of this business during 2015? If "No," see instructions for limit on losses . ☒ Yes ☐ No
H If you started or acquired this business during 2015, check here ▶ ☐
I Did you make any payments in 2015 that would require you to file Form(s) 1099? (see instructions) ☐ Yes ☒ No
J If "Yes," did you or will you file required Forms 1099? ☐ Yes ☐ No

Part I Income

		Line	Amount
1	Gross receipts or sales. See instructions for line 1 and check the box if this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked ▶ ☐	1	242,950.
2	Returns and allowances	2	12,414.
3	Subtract line 2 from line 1	3	230,536.
4	Cost of goods sold (from line 42)	4	102,976.
5	**Gross profit.** Subtract line 4 from line 3	5	127,560.
6	Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	
7	**Gross income.** Add lines 5 and 6 ▶	7	127,560.

Part II Expenses. Enter expenses for business use of your home **only** on line 30.

		Line	Amount			Line	Amount
8	Advertising	8	5,429.	18	Office expense (see instructions)	18	468.
9	Car and truck expenses (see instructions)	9		19	Pension and profit-sharing plans	19	
10	Commissions and fees	10		20	Rent or lease (see instructions):		
11	Contract labor (see instructions)	11		a	Vehicles, machinery, and equipment	20a	7,108.
12	Depletion	12		b	Other business property	20b	22,115.
13	Depreciation and section 179 expense deduction (not included in Part III) (see instructions)	13	4,774.	21	Repairs and maintenance	21	2,474.
				22	Supplies (not included in Part III)	22	5,434.
				23	Taxes and licenses	23	4,498.
				24	Travel, meals, and entertainment:		
14	Employee benefit programs (other than on line 19)	14		a	Travel	24a	
15	Insurance (other than health)	15	6,508.	b	Deductible meals and entertainment (see instructions)	24b	470.
16	Interest:			25	Utilities	25	8,311.
a	Mortgage (paid to banks, etc.)	16a		26	Wages (less employment credits)	26	29,737.
b	Other	16b	10,364.	27a	Other expenses (from line 48)	27a	25,503.
17	Legal and professional services	17	1,221.	b	**Reserved for future use**	27b	

		Line	Amount
28	**Total expenses** before expenses for business use of home. Add lines 8 through 27a ▶	28	134,414.
29	Tentative profit or (loss). Subtract line 28 from line 7	29	-6,854.
30	Expenses for business use of your home. Do not report these expenses elsewhere. Attach Form 8829 unless using the simplified method (see instructions). **Simplified method filers only:** enter the total square footage of: (a) your home: ________ and (b) the part of your home used for business: ________ . Use the Simplified Method Worksheet in the instructions to figure the amount to enter on line 30	30	
31	**Net profit or (loss).** Subtract line 30 from line 29. • If a profit, enter on both **Form 1040, line 12** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2.** (If you checked the box on line 1, see instructions). Estates and trusts, enter on **Form 1041, line 3.** • If a loss, you **must** go to line 32.	31	-6,854.

32 If you have a loss, check the box that describes your investment in this activity (see instructions).
• If you checked 32a, enter the loss on both **Form 1040, line 12,** (or **Form 1040NR, line 13**) and on **Schedule SE, line 2.** (If you checked the box on line 1, see the line 31 instructions). Estates and trusts, enter on **Form 1041, line 3.**
• If you checked 32b, you **must** attach **Form 6198.** Your loss may be limited.

32a ☒ All investment is at risk.
32b ☐ Some investment is not at risk.

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Part III Cost of Goods Sold (see instructions)

33 Method(s) used to value closing inventory: a ☐ Cost b ☐ Lower of cost or market c ☐ Other (attach explanation)

34 Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation . . . ☐ Yes ☐ No

35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	
36	Purchases less cost of items withdrawn for personal use	36	102,976.
37	Cost of labor. Do not include any amounts paid to yourself	37	
38	Materials and supplies	38	
39	Other costs	39	
40	Add lines 35 through 39	40	102,976.
41	Inventory at end of year	41	
42	**Cost of goods sold.** Subtract line 41 from line 40. Enter the result here and on line 4	42	102,976.

Part IV Information on Your Vehicle.

Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43 When did you place your vehicle in service for business purposes? (month, day, year) ▶ ______

44 Of the total number of miles you drove your vehicle during 2015, enter the number of miles you used your vehicle for:

a Business ______ b Commuting (see instructions) ______ c Other ______

45 Was your vehicle available for personal use during off-duty hours? ☐ Yes ☐ No

46 Do you (or your spouse) have another vehicle available for personal use?. ☐ Yes ☐ No

47a Do you have evidence to support your deduction? ☐ Yes ☐ No

b If "Yes," is the evidence written? ☐ Yes ☐ No

Part V Other Expenses.

List below business expenses not included on lines 8–26 or line 30.

BANK CHARGES - CREDIT CARD FEES	15,275.
GARBAGE DISPOSAL	1,335.
TELEPHONE	6,256.
UNIFORMS	180.
DELIVERY & PICK UP AUTO	2,457.
48 **Total other expenses.** Enter here and on line 27a . . . 48	25,503.